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## CLOSURE REPORT

REMOVAL OF TWO WASTE OIL UNDERGROUND STORAGE TANKS

CHEMICAL LEAMAN TANK LINES, INC.  
NAZARETH, PENNSYLVANIA

OCTOBER 1995

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PREPARED FOR:  
ENVIROPOWER, INC.  
EXTON, PENNSYLVANIA

• • •  
PREPARED BY:  
MONTGOMERY WATSON  
Wayne, Pennsylvania

PROJECT NO. 4153.0080

STORAGE TANKS	
FACILITY:	
NOV - 1 1995	
ID #:	
COUNTY:	
FILE CODE:	



MONTGOMERY WATSON

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**MONTGOMERY WATSON**

October 11, 1995

Donald K. Emig, Ph.D., P.E.  
Vice President & Chief Engineer  
EnviroPower, Inc.  
102 Pickering Way  
Exton, Pennsylvania 19341-0020

Re: Closure Report - Underground Storage Tank Removal  
Chemical Leaman Tank Lines, Inc.  
Route 248  
Nazareth, Pennsylvania 18064      Site ID: 4-806637

Dear Dr. Emig:

Montgomery Watson is pleased to present this closure report for the removal of two regulated waste oil underground storage tanks (USTs) with capacities of 550-gal and 1,000-gal. The two former USTs were located at Chemical Leaman Tank Lines, Inc. (CLTL), Route 248, Nazareth, PA. The site activities were completed from September 18, 1995 through September 26, 1995. The closure report form is included as Appendix A. The site location is shown in Figure 1. The locations of the former USTs are shown in Figure 2. Color photographs of the removal procedures are included as Appendix B.

Site activities included the removal of five regulated USTs and two unregulated USTs. This report addresses the removal of two of the five regulated tanks. The remaining three regulated tanks are being addressed by another Pennsylvania Department of Environmental Protection (PADEP) certified firm. The two unregulated USTs are addressed in a separate letter to your office.

## **1.0 FIELD PREPARATION ACTIVITIES**

Preparation activities included:

- Submitting the Closure Notification Form to the PADEP and the State Fire Marshal
- Marking site utilities

**Closure Notification Form** - On behalf of CLTL, Montgomery Watson submitted a Closure Notification Form to PADEP. This form indicated CLTL's intent to remove five regulated and two unregulated USTs located at the Nazareth, PA facility. A copy of this form was also sent to the State Fire Marshall. This form is included as Appendix C.

**Utilities** - Prior to the initiation of field activities, Pennsylvania One Call was notified and the appropriate companies marked utilities in the vicinity of the excavations. The Pennsylvania One Call reference number was 2551119.

## 2.0 UST SYSTEM INFORMATION

This report addresses the removal of two regulated USTs. The approximate date, size, construction, contents, and type of pumping system are listed below.

<u>Tank Number</u>	<u>Approximate Installation Date</u>	<u>Capacity (gallons)</u>	<u>Tank Construction</u>	<u>Tank Contents</u>	<u>Pumping System</u>
004	1963	550	Single Wall Steel	Used Motor Oil	N/A
005	1973	1,000	Single Wall Steel	Used Motor Oil	N/A

## 3.0 TANK HANDLING ACTIVITIES

The work completed was conducted in accordance with practices described in the *American Petroleum Institute (API) Bulletins 1604 and 2105*, and the PADEP guidance document entitled *Closure Requirements for Underground Storage Tank Systems*, dated December 1993 (Guidance Document). A description of the work is included below.

### 3.1 Raw Material Removal

Liquid in the seven tanks was removed using a vacuum truck. The liquid was transported by ABC Tank Company to the Republic Environmental oil recycling facility. A total of 1,450 gal of used motor oil, virgin fuel oil, and virgin diesel fuel were manifested and transported for recycling, including approximately 200 gal from the waste oil tanks. The manifest for this material is included as Appendix D.

### 3.2 Tank Removal

The USTs were removed from the ground and staged for cleaning. A track hoe excavator was used to excavate soil covering the tanks. The tank interiors were monitored for lower explosive limit and oxygen using a combustible gas indicator. After the tank interiors were monitored, the soil adjacent to each tank was removed and the tanks were lifted from the ground. The tanks were staged for later cutting, final cleaning, and scrapping.

### 3.3 Tank Cleaning

The ends of the tanks were cut, and the tanks were entered for cleaning purposes. Percent lower explosive limit (LEL) and oxygen levels were monitored using a combustible gas indicator (CGI). In each case, the CGI indicated the Percent LEL was below 20 percent and the oxygen level was 21.9 percent. The proper level of worker protection was established, confined space entry permits were issued, and a technician entered each tank to perform cleaning activities. The sides of the tanks were manually scraped with non-sparking hand tools. Oil-dri absorbent was used to remove remaining product. The tanks were transported to E. Schneider & Sons, located in Allentown, Pennsylvania, for scrapping.

(Appendix E). Sludge and associated liquid were collected and contained in 55 gallon steel drums. Six drums of liquid and sludge were generated during cleaning of the seven tanks, including approximately 2 drums of liquid and sludge from the two waste oil tanks.

### 3.4 Site Control

Several site control measures were implemented to reduce the risk associated with site activities. At the end of each working day, orange safety fencing and/or caution tape was placed around the excavations to prevent accidental entry. Site personnel were informed of the potential hazards associated with tank removal activities during daily health & safety meetings. Precautionary measures (first aid kits, fire extinguishers, etc.) were available at the site. Stained soil excavated during tank removal activities was placed on polyethylene sheeting and covered to prevent runoff and dispersion of vapor.

## 4.0 SITE ASSESSMENT

Following removal of each tank, a site assessment was conducted to investigate the potential for impacted soil within each excavation. Presence of impacted soil was evaluated through visual observation, odor, and field screening with a photoionization detector (PID). Confirmatory samples were collected in accordance with the Guidance Document to identify the absence or presence of impacted soil in each excavation. Samples were submitted to Caschem Laboratories, located in Canton, Ohio (Caschem) for analysis. Sample collection locations are shown in Figure 2.

Sampling procedures included the collection of grab soil samples from the excavation. Samples were collected directly from the excavator bucket by hand and placed in laboratory supplied clean glass jars. To prevent cross contamination, a clean pair of surgical latex gloves was worn to collect each sample. The jars were labeled, placed in an ice-filled cooler, and sent via FedEx to Caschem under full chain-of-custody procedures.

The samples were analyzed for Total Recoverable Petroleum Hydrocarbons (TRPH) using U.S. EPA Method 418.1, and lead using U.S. EPA Method 6010. Analytical results were compared to standards published in the document entitled *Pennsylvania's Land Recycling Program Technical Manual*, dated June 18, 1995 (Technical Manual). The TRPH remediation standard of 500 mg/kg is found in Chapter III of the Technical Manual. Appendix B2 of the Technical Manual lists the *Statewide Human Health Standards for Soils*. The lead standard listed for ingestion in non-residential areas is 600 mg/kg. The following section presents the site assessment findings during removal of former UST Nos. 4 and 5. The analytical results are summarized in Tables 1 and 2. Laboratory analysis reports are included as Appendix F.

### 4.1 UST No. 4: 550-Gal Used Motor Oil Tank

**Findings:** The tank appeared to be in good condition. No obvious holes were observed in the tank. However, minor staining was present around the tank's fill port.

**Actions:** Two samples were collected from the bottom of the excavation (004-001-007, 004-002-007) at a depth of seven feet. An additional sample (004-PIPE-02) was collected from beneath the piping at a depth of two feet. The three samples were analyzed TRPH and lead. The analytical results indicated that TRPH were present in the soil directly beneath the former UST at concentrations of 8,690 mg/kg and 4,190 mg/kg, respectively, above the 500 mg/kg remediation standard. TRPH were not detected in the sample collected from beneath the piping. Lead concentrations in the three samples ranged between 8.7 mg/kg and 12.0 mg/kg, below the non-residential ingestion standard of 600 mg/kg.

Due to the elevated levels of TRPH in soil at the bottom of the excavation, remedial efforts were initiated. Additional excavation was conducted, including expanding the excavation by approximately two feet in each direction and vertically to a depth of nine feet. Following completion of this removal effort, approximately 150 tons of impacted soil had been removed from the excavation. Five additional samples were collected from the expanded excavation, including one sample from the bottom of the excavation (004-003-09) at a depth of nine feet, and four side wall samples (004-004-05, 004-005-05, 004-006-05, 004-007-05) from a depth of five feet. The five additional samples were analyzed for TRPH and lead.

TRPH were not detected in the five additional samples collected from the excavation. Lead results ranged from below detection limits to 9.2 mg/kg, below the non-residential ingestion standard of 600 mg/kg. These results demonstrate that the remedial efforts successfully removed the impacted soil.

#### **4.2 UST No. 5: 1,000-Gal Waste Oil Tank**

**Findings:** The tank appeared to be in good condition. No obvious holes were observed in the tank. Minor quantities of stained soil were present around and below the combination fill port/product delivery connection. However, visually stained soil appeared to be isolated to the fill material immediately surrounding the tank.

**Action:** Approximately 50 tons of visually stained soil was removed from the excavation. This soil was stockpiled on and covered by polyethylene sheeting. Since the fill port and product delivery line were manifolded into the same fitting, one sample (005-001-09) was collected from the excavation.

TRPH were not detected in the excavation sample. The lead concentration was 9.4 mg/kg, below the non-residential ingestion standard of 600 mg/kg. This analysis demonstrates that impacted soil was limited to the original tank excavation, and was successfully removed.

#### **4.3 PADEP Correspondence**

PADEP was notified by telephone of a release from both former UST Nos. 4 and 5. This telephone conversation was followed up in writing through submittal of a completed PADEP form entitled *Notification of Reportable Release/ Notification of Contamination*, which was submitted on October 2, 1995. This document is included in Appendix C.

#### 4.4 Site Restoration

Site restoration included back filling of excavations to grade. Back fill material consisted of off-site clean fill material in a quantity necessary to fill the void left by the UST removal and the removal of contaminated soils.

#### 4.5 Soil Pile

Following completion of the excavation activities, approximately 200 tons of visually stained soil had been removed from the two waste oil UST excavations. The soil was stockpiled on and covered by polyethylene sheeting pending treatment or disposal.

### 5.0 CONCLUSIONS AND RECOMMENDATIONS

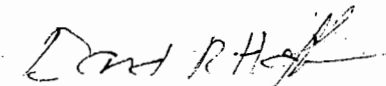
Two regulated USTs were removed from the CLTL facility located on Route 248, Nazareth, Pennsylvania. Localized stained soil was observed in each excavation. Corrective action was initiated in the Tank No. 4 excavation. This procedure included expanding the excavation by approximately two feet in each direction and vertically to a depth of nine feet. Stained soil in the Tank No. 5 excavation was limited to the tank bedding and overburden material. Following excavation of visually stained soil, subsequent sampling demonstrated the successful removal of impacted soil from both excavations.

Based on the information contained in this closure report, Montgomery Watson recommends that CLTL submit these findings to PADEP with a request for No Further Action associated with the two waste oil tank excavations.

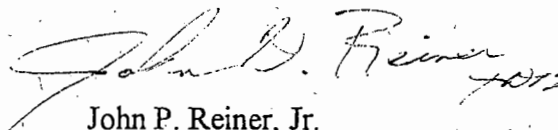
Montgomery Watson appreciates the continued opportunity to be of service to EnviroPower, Inc. on this project. If you have any questions concerning this report or the project in general, please contact us at (610)964-0808.

Sincerely,

MONTGOMERY WATSON



David R. Hoffman, P.E.  
Project Manager



John P. Reiner, Jr.  
Environmental Engineer

JPR/vca/DRH  
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**Table 1**  
**Summary of Soil Analytical Results**  
**550-Gal Waste Oil UST No. 4**

Chemical Leaman Tank Lines, Inc.  
Nazareth, Pennsylvania

Sample ID	Date Collected	Analytical Results					
		TPH (U.S. EPA 418.1)			Lead (U.S. EPA 6010)		
		Conc.	Units	Detection Limit	Conc.	Units	Detection Limit
Original Excavation							
004-001-07	9/18/95	8690	mg/kg	150	8.7	mg/kg	5
004-002-07	9/18/95	4190	mg/kg	60	12.0	mg/kg	5
004-PIPE-02	9/18/95	ND	mg/kg	10	8.8	mg/kg	5
Post Corrective Action							
004-003-09	9/20/95	ND	mg/kg	10	9.1	mg/kg	5
004-004-05	9/20/95	ND	mg/kg	10	9.2	mg/kg	5
004-005-05	9/20/95	ND	mg/kg	10	5.8	mg/kg	5
004-006-05	9/20/95	ND	mg/kg	10	ND	mg/kg	5
004-007-05	9/20/95	ND	mg/kg	10	ND	mg/kg	5

Notes:

- 1) Sample ID: 004-001-07  
004: Excavation Number  
001: Sample Number  
07: Sample Depth
- 2) Samples are discreet grab samples

RES/vca/JPR

j:\4153\0080\WP\TBL\ NAZANALY.XLS

10/11/95

UST 4



**Table 2**  
**Summary of Soil Analytical Results**  
**1,000-Gal Waste Oil UST No. 5**

Chemical Leaman Tank Lines, Inc.  
Nazareth, Pennsylvania

Sample ID	Date Collected	Analytical Results					
		TPH (U.S. EPA 418.1)			Lead (U.S. EPA 6010)		
		Conc.	Units	Detection Limit	Conc.	Units	Detection Limit
005-001-09	9/20/95	ND	mg/kg	10	9.4	mg/kg	5

Notes:

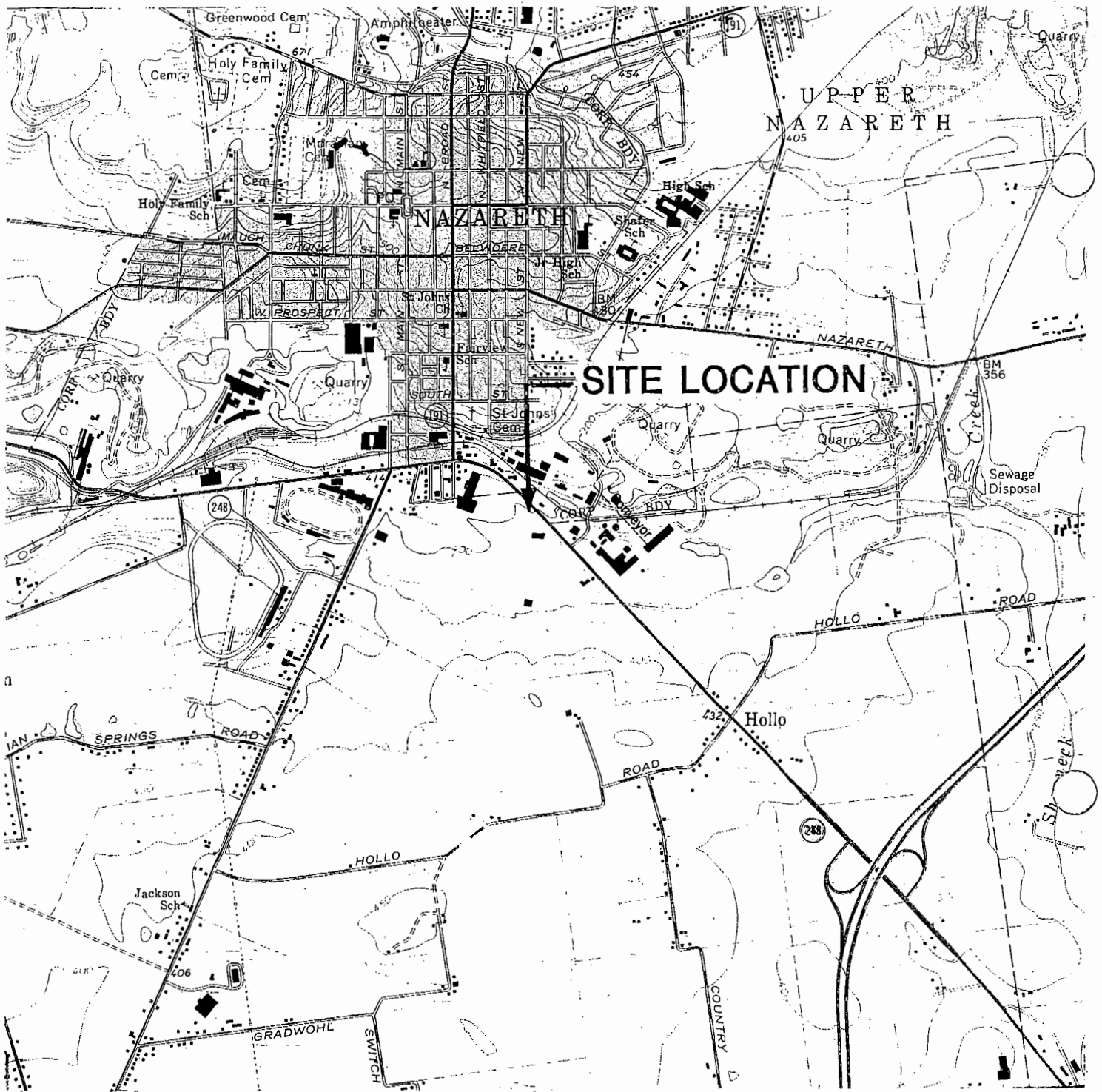
- 1) Sample ID: 005-001-09  
005: Excavation Number  
001: Sample Number  
09: Sample Depth
- 2) Samples are discreet grab samples

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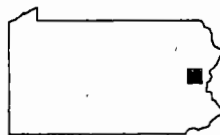
UST 5



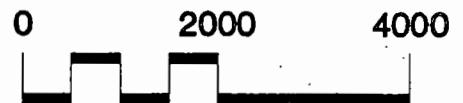
# **NOTE**

BASE MAP DEVELOPED FROM THE NAZARETH, PENNSYLVANIA, 7.5 MINUTE U.S.G.S. TOPOGRAPHIC QUADRANGLE MAP, DATED 1964.. PHOTOREVISED 1992.

PENNSYLVANIA



QUADRANGLE LOCATION



SCALE IN FEET **FIGURE 1**

Developed By	JPR	Drawn By	JSL
Approved By		Date	
Reference			
Revisions			

## **SITE LOCATION MAP**

CHEMICAL LEAMAN TANK LINES INC.  
ROUTE 248  
NAZARETH, PENNSYLVANIA  
FACILITY ID # 4-806637

Drawing Number  
4153.0080

**MONTGOMERY  
WATSON**



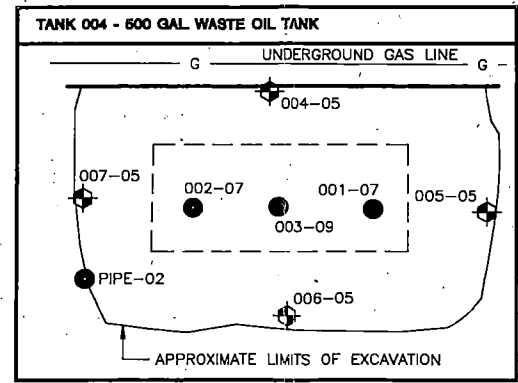
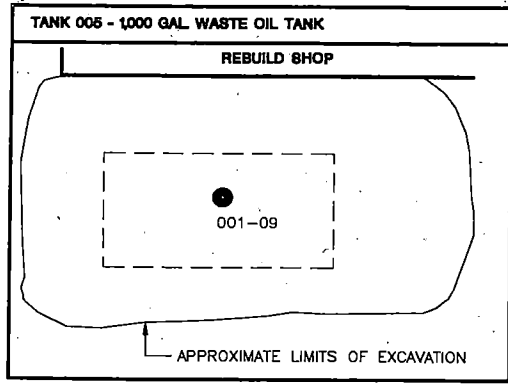
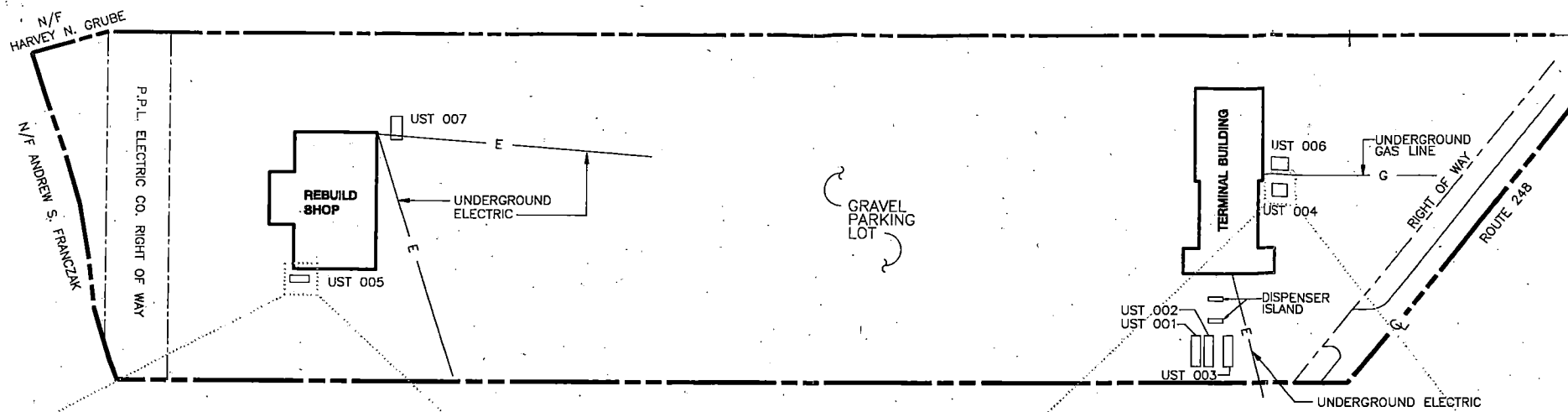
**A**

This document has been developed for a specific application and should not be used without the written approval of Montgomery Watson.

QUALITY CONTROL  
Graphic Standard, Lead Professional

Technical Review  
Project Manager

Management Review  
Other



**NOTE**  
BASE MAP DEVELOPED FROM SITE PLAN PROVIDED BY ENVIROPOWER, INC. AND OBSERVATIONS MADE BY MONTGOMERY WATSON FROM SEPTEMBER 18 THROUGH 26, 1995.

- LEGEND**
- BOTTOM SAMPLE LOCATION
  - ⊕ SIDEWALL SAMPLE LOCATION
  - PARCEL BOUNDARY
  - 004-001-07  
004 SAMPLE ID  
001 EXCAVATION NUMBER  
07 SAMPLE DEPTH

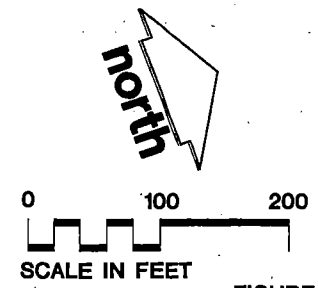


FIGURE 2

APPENDIX A

Closure Report Form

## ATTACHMENT 4

UNDERGROUND STORAGE TANK  
CLOSURE REPORT FORM

Owners who are permanently closing underground storage tanks shall use this form to demonstrate that an underground storage tank closure was performed in accordance with the "Closure Requirements For Underground Storage Tank Systems" document, November 1993. PLEASE PRINT OR TYPE. COMPLETE ALL QUESTIONS.

## SECTION I. Owner/Facility/Tank/Waste Management and Disposal Information

1. Facility ID Number 4-806637
2. Facility Name Chemical Leaman Tank Lines, Inc.
3. Facility County Northampton
4. Facility Municipality Nazareth
5. Facility Address Route 248, Nazareth, PA 18064
6. Facility Contact Person Ed Kinsley
7. Facility Telephone Number 610) 759-3407
8. Owner Name Chemical Leaman Tank Lines, Inc.
9. Owner Mailing Address 102 Pickering Way, Exton, PA 19341-0200
10. Description of Underground Storage Tanks (Complete for each tank closed)

Tank Registration Number	004	005			
Date of Tank Installation (Month/Year)	1963	1973			
Estimated Total Capacity (Gallons)	550	1000			
Tank Material of Construction	Steel	Steel			
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum Unleaded Gasoline <input type="checkbox"/> Leaded Gasoline <input type="checkbox"/> Aviation Gasoline <input type="checkbox"/> Kerosene <input type="checkbox"/> Jet Fuel <input type="checkbox"/> Diesel Fuel <input type="checkbox"/> Fuel Oil No. 1 <input type="checkbox"/> Fuel Oil No. 2 <input type="checkbox"/> Fuel Oil No. 4 <input type="checkbox"/> Fuel Oil No. 5 <input type="checkbox"/> Fuel Oil No. 6 <input type="checkbox"/> New Motor Oil <input type="checkbox"/> Used Motor Oil <input checked="" type="checkbox"/> Other, Please Specify _____ <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance Name of Principal CERCLA Substance _____ AND Chemical Abstract Service (CAS) No. _____ c. Unknown <input type="checkbox"/>	<input type="checkbox"/> _____ _____ <input type="checkbox"/>	<input type="checkbox"/> _____ _____ <input type="checkbox"/>	<input type="checkbox"/> _____ _____ <input type="checkbox"/>	
Date of Tank Closure (Month/Day/Year)	9-19-95	9-20-95			
Tank Closure Method (Check Only One)	a. Removal <input checked="" type="checkbox"/> b. Closure-in-Place <input type="checkbox"/> c. Change-In-Service <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Tank Registration Number						
Date of Tank Installation (Month/Year)						
Estimated Total Capacity (Gallons)						
Tank Material of Construction						
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum					
	Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fuel Oil No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Other, Please Specify					
	NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Name of Principal				
	CERCLA Substance					
	AND					
	Chemical Abstract					
	Service (CAS) No.					
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Date of Tank Closure (Month/Day/Year)						
Tank Closure Method (Check Only One)	a. Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

es N/A

11. Briefly describe the storage tank facility and the nature of the operations which were conducted at the facility (both historical and present): Facility is a trucking terminal.  
Operations include dispatching and truck repair.

- ☒ 12. A plot map of the site, drawn to scale, is attached. The map shows adjacent streets or roads; directions to the nearest major street or highway; buildings on the site; locations of existing and closed tanks, lines and pump islands; and locations where obvious contamination was observed.
- ☒ 13. Original, color photographs of the closure process are attached.
- ☒ ☐ 14. All applicable local permits/approvals were obtained. (Attach copies)
- ☒ 15. An amended "Registration of Storage Tanks" form was submitted to the Division of Storage Tanks.  
Date: \_\_\_\_\_
- ☒ ☐ 16. If a reportable release was confirmed, the appropriate regional office of DER was notified by the owner or operator.  
Date: 9-19-95 Office: Northeast Region

Yes N/A

- ☒ ☐ 17. If tanks were cleaned on-site:
- a. Briefly describe the disposition of usable product: No usable product was removed from the tanks.
- b. Briefly describe the disposition of unusable product, sludges, sediments, tank bottoms and wastewater. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal): Free liquids were removed using a vac truck and disposed at Republic Environmental Oil Recycling, Inc. Sludges were containerized in 55-gallon drums and staged on-site.
- c. If tank contents were determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: \_\_\_\_\_
- (2) Licensed Hazardous Waste Transporter Name and ID Number: \_\_\_\_\_
- ☐ ☒ 18. If tanks were removed from the site for cleaning:
- a. Provide the name and permit number of the processing, treatment, storage or disposal facility performing the tank cleaning: \_\_\_\_\_
- b. If tank contents were determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: \_\_\_\_\_
- (2) Licensed Hazardous Waste Transporter Name and ID Number: \_\_\_\_\_
19. Briefly describe the disposition of tanks/piping (Attach documentation of proper disposal): Tank/piping were cleaned and rendered useless by cutting and manual cleaning. Tank/piping were transported to E. Schneider & Sons as scrap metal.
- ☒ ☐ 20. If contaminated soil is excavated:
- a. Briefly describe the disposition of contaminated soil. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal): Contaminated soils were staged on and covered by polyethylene sheeting.
- b. If contaminated soil is determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: \_\_\_\_\_
- (2) Licensed Hazardous Waste Transporter Name and ID Number: \_\_\_\_\_

21. Briefly describe the disposition of uncontaminated soil: \_\_\_\_\_

N/A

DONALD K. EMIG

(Print Name)

hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904

*agent for the*

relating to unsworn falsification to authorities) that I am the owner of the above referenced storage tank(s) and that the information provided by me in this closure report (Section I) is true, accurate and complete to the best of my knowledge and belief.

*Donald K. Emig*

Signature of Tank Owner

*Agent for the*

10-30-95

Date



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF WATER QUALITY MANAGEMENT  
DIVISION OF STORAGE TANKS

UNDERGROUND STORAGE TANK  
CLOSURE REPORT FORM

SECTION II. Tank Handling Information

es N/A

Tank 004

1. Briefly describe the excavation and initial on-site staging of uncontaminated/contaminated soil:

Soil was staged on and covered by polyethylene sheeting.

2. Briefly describe the closure of the piping systems including the quantity and condition of the piping:  
Approximately 5ft of piping was removed from the excavation. A 10ft section of piping was abandoned in place between the excavation and the building. Each end of the abandoned pipe was grouted to prevent future use. The visible piping appeared to be in good condition.

3. Briefly describe the method used to purge the tanks of and monitor for explosive vapors:  
The tank was monitored for explosive vapors using an Industrial Scientific Combustible Gas Meter. The tank did not require purging.

- ☒ ☐ 4. If tanks were cleaned on-site:

a. Briefly describe the tank cleaning process:  
The tank was monitored for explosive vapors. The ends of the tank were cut off using non-sparking

cutting tools. The tank was entered and manually cleaned under a confined space entry permit.

b. If subcontracted, name and address of company that performed the tank cleaning:  
Voorheis and Company, Inc., 13468 Heimberger Rd., Baltimore, Ohio 43105

5. Briefly describe the condition of the tanks and any problems encountered during tank removal:  
The tank was in good condition. No obvious holes were observed.

No problems were encountered.

- ☐ ☒ 6. If tanks were closed-in-place, briefly describe the tank fill material:

- ☒ ☐ 7. If contamination was suspected or observed, the "Notification of Contamination" form was submitted.

I, John P. Reimer, Jr.

(Print Name)

hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904

(relating to unsworn falsification to authorities) that I am the certified installer who performed the tank handling activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section II) is true, accurate and complete to the best of my knowledge and belief.

John P. Reimer, Jr.  
Signature of Certified Installer

4622

Installer Certification Number

October 2, 1995

Date

1112

Company Certification Number



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF WATER QUALITY MANAGEMENT  
DIVISION OF STORAGE TANKS

UNDERGROUND STORAGE TANK  
CLOSURE REPORT FORM

SECTION II. Tank Handling Information

Tank 005

Yes N/A

1. Briefly describe the excavation and initial on-site staging of uncontaminated/contaminated soil:  
Soil was staged on and covered by polyethylene sheeting.
2. Briefly describe the closure of the piping systems including the quantity and condition of the piping:  
The 10ft of piping was removed during tank excavation activities.  
The piping appeared to be in good condition.
3. Briefly describe the method used to purge the tanks of and monitor for explosive vapors:  
The tank was monitored for explosive vapors using an Industrial Scientific Combustible Gas Meter. The tank did not require purging.
- ☒ ☐ 4. If tanks were cleaned on-site:
  - a. Briefly describe the tank cleaning process:  
The tank was monitored for explosive vapors. The ends of the tank were cut off using non-sparking cutting tools. The tank was entered and manually cleaned under a confined space entry permit.
  - b. If subcontracted, name and address of company that performed the tank cleaning:  
Voorheis and Company, Inc., 13468 Heimberger Rd., Baltimore, 43105
5. Briefly describe the condition of the tanks and any problems encountered during tank removal:  
The tank was in good condition. No obvious holes were observed.  
No problems were encountered.
- ☐ ☒ 6. If tanks were closed-in-place, briefly describe the tank fill material: \_\_\_\_\_
- ☒ ☐ 7. If contamination was suspected or observed, the "Notification of Contamination" form was submitted.

I, John P. Reiner, Jr., hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904  
(Print Name)

(relating to unsworn falsification to authorities) that I am the certified installer who performed the tank handling activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section II) is true, accurate and complete to the best of my knowledge and belief.

John P. Reiner, Jr.  
Signature of Certified Installer

4622

Installer Certification Number

October 2, 1995

Date

1112

Company Certification Number

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF WATER QUALITY MANAGEMENT  
DIVISION OF STORAGE TANKS

UNDERGROUND STORAGE TANK  
CLOSURE REPORT FORM

SECTION III. Site Assessment Information

(Complete this Section for Each Tank)

Tank Registration Number 005

Yes No N/A

- ☐ ☒ 1. Was bedrock encountered during excavation or conduct of soil borings? If yes, at what depth below grade: \_\_\_\_\_
- ☐ ☒ 2. Was ground water encountered during excavation or conduct of soil borings? If yes, at what depth below grade: \_\_\_\_\_
- ☒ ☐ ☐ 3. If tank system was removed from the ground, was obvious contamination observed during excavation of soil/backfill? If yes, the owner or operator must notify the appropriate regional office of DER within 2 hours.
- ☒ ☐ 4. If the answer to #3 is yes, was contamination localized, i.e. limited to soil/backfill material of original tank excavation? If no, owner or operator must continue corrective action in accordance with the corrective action process regulations and submit the closure report form within 15 days after the completion of tank system removal.
- ☒ 5. If the answer to #3 is no or if the answer to #4 is yes, confirmatory samples were collected in accordance with the confirmatory sampling protocol and analyzed utilizing the appropriate analytical methodologies specified in the closure document. Submit closure report form within 15 days of receiving analytical results.
- ☐ ☐ ☒ 6. If tank system was closed-in-place or completed a change-in-service, was obvious contamination observed during the determination of depth to ground water, conduct of soil borings, or collection of soil/ground water samples? If yes, owner or operator must initiate corrective action in accordance with the corrective action process regulations, notify the appropriate regional office of DER within 2 hours, and submit the closure report form within 15 days of observing contamination.
- ☐ 7. If the answer to #6 is no, confirmatory samples were collected in accordance with the confirmatory sampling protocol and analyzed utilizing the appropriate analytical methodologies specified in the closure document. Submit closure report form within 15 days of receiving analytical results.
- ☐ 8. If the answer to #5 or #7 is yes, sample/analysis information is summarized on attached table, sampling diagram is attached showing sample collection locations and depths below grade, laboratory analysis reports are attached and chain-of-custody forms are attached.

I, John P. Reiner, Jr.

(Print Name)

hereby certify, under penalty of law as provided in 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.

John P. Reiner, Jr.

Signature of Person Performing Site Assessment

Environmental Engineer

Title of Person Performing Site Assessment

October 2, 1995

Date

Montgomery Watson

Name of Company Performing Site Assessment

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF WATER QUALITY MANAGEMENT  
DIVISION OF STORAGE TANKS

UNDERGROUND STORAGE TANK  
CLOSURE REPORT FORM

Sample/Analysis Information  
(Attachment for Section III.8)

Sample I.D. (See diagram)	Parameter	Analytical Method	Media	Result (units)	Detection Limit (units)	Date Sample Taken	Date Sample Analyzed
004-001-07	TPH	418.1	soil	8,690 mg/kg	150 mg/kg	9/18/95	9/20/95
	Lead	6010	soil	8.70 mg/kg	5 mg/kg	9/18/95	9/19/95
004-002-07	TPH	418.1	soil	4,190 mg/kg	60 mg/kg	9/18/95	9/20/95
	Lead	6010	soil	12.0 mg/kg	5 mg/kg	9/18/95	9/19/95
004-PIPE-02	TPH	418.1	soil	ND	10 mg/kg	9/18/95	9/20/95
	Lead	6010	soil	8.75 mg/kg	5 mg/kg	9/18/95	9/19/95
004-003-09	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	9.1 mg/kg	5 mg/kg	9/20/95	9/21/95
004-004-05	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	9.2 mg/kg	5 mg/kg	9/20/95	9/21/95
004-005-05	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	5.8 mg/kg	5 mg/kg	9/20/95	9/21/95
004-006-05	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	ND	5 mg/kg	9/20/95	9/21/95
004-007-05	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	ND	5 mg/kg	9/20/95	9/21/95
005-001-09	TPH	418.1	soil	ND	10 mg/kg	9/20/95	9/22/95
	Lead	6010	soil	9.4	5 mg/kg	9/20/95	9/21/95

APPENDIX C

PADEP Correspondence

ATTACHMENT 2

UNDERGROUND STORAGE TANK  
CLOSURE NOTIFICATION FORM

**NOTE:** Notification of permanent closure must be received by the appropriate regional office of the Department  
least 30 days prior to initiation of the closure activities.

## I. Owner of Tanks

Owner Name

Chemical Leaman Tank Lines, Inc.

Street Address

102 Pickering Way

Phone Number

(610) 363-4284

City

Exton

State

PA

Zip Code

19341-0200

## II. Location of Tanks

Facility Name

Chemical Leaman Tank Lines, Inc.

Facility Identification Number

4-806637

Street Address

Route 248

Municipality

Nazareth

18064

County

Northampton

Contact Person

Ed Kinsley

Phone Number

(610) 759-3407

## III. Month/Day/Year of Proposed Closure

09 / 18 / 95

## IV. Certified Installer/Company Performing Tank Handling Activities

Certified Installer Name

John P. Reiner, Jr.

Installer Certification Number

4622

Street Address

435 Devon Park Drive, Suite 410

Phone Number

(610) 964-0808

City

Wayne

State

PA

Zip Code

19087

Certified Company Name

Montgomery Watson (formerly Warzyn, Inc.)

Company Certification Number

1112

## V. Contractor/Individual Performing Site Assessment Activities

Name of Contractor or Individual

Montgomery Watson (formerly Warzyn, Inc.)

Street Address

435 Devon Park Drive, Suite 410

Phone Number

(610) 964-0808

City

Wayne

State

PA

Zip Code

19087

## VI. Description of Underground Storage Tanks (See reverse side of form)

## VII. Will this closure involve replacement of at least one old tank with a new tank?

Yes

No X

## VIII. Signature of Agent for Tank Owner

Date August 14, 1995

*Donald R. Hoff* FOR  
Donald R. Emig, Ph.D., P.E.  
Vice President & Chief Engineer, EnviroPower, Inc.

#### VI. Description of Underground Storage Tanks (Complete for each tank undergoing closure)

Tank Registration Number	001	002	003	004
Date of Tank Installation (Month/Year)	1960	1960	1960	1963
Estimated Total Capacity (Gallons)	4000	4000	4000	550
Tank Material of Construction	Steel	Steel	Steel	Steel
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)				
a. Petroleum				
Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diesel Fuel	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Oil No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Other, Please Specify	_____	_____	_____	_____
b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of Principal CERCLA Substance	_____	_____	_____	_____
AND				
Chemical Abstract Service (CAS) No.	_____	_____	_____	_____
c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Tank Closure Method (Check Only One)				
a. Removal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tank Registration Number		005	006	007
Date of Tank Installation (Month/Year)		1973	1960	1973
Estimated Total Capacity (Gallons)		550	6000	6000
Tank Material of Construction		Steel	Steel	Steel
Substance(s) Stored	a. Petroleum			
Throughout Operating	Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life of Tank	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Check All That Apply)	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Used Motor Oil	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other, Please Specify	_____	_____	_____
	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name of Principal	_____	_____	_____
	CERCLA Substance	_____	_____	_____
	AND			
	Chemical Abstract	_____	_____	_____
	Service (CAS) No.	_____	_____	_____
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Tank	a. Removal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Closure Method	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Check Only One)	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# **NOTIFICATION OF REPORTABLE RELEASE** (Owners and Operators) **NOTIFICATION OF CONTAMINATION** (Certified Installers and Inspectors)

## **NOTIFICATION OF REPORTABLE RELEASE (Owners and Operators)**

On August 21, 1993, the Storage Tank Program's Corrective Action Process (CAP) regulations became effective. These regulations establish release reporting requirements for owners and operators of storage tanks and storage tank facilities.

Subsection 245.305(a) of the regulations requires owners or operators to notify the appropriate regional office of the Department as soon as practicable, but no later than 2 hours, after the confirmation of a reportable release.

Subsection 245.305(d) requires owners or operators to provide written notification to the appropriate regional office and to the local municipality, within 15 days of the notice required by Subsection 245.305(a). This form may be used to comply with Subsection 245.305(d).

**OWNERS AND OPERATORS (O/O)**

**PLEASE COMPLETE SECTIONS I, II, IIIA, IIIB, IV, V, VII and VIII.**

## **NOTIFICATION OF CONTAMINATION (Certified Installers and Inspectors)**

On September 21, 1991, the Storage Tank Program's Certification regulations became effective. These regulations establish standards of performance for certified installers and inspectors of storage tanks and storage tank facilities.

Subsection 245.132(a)(4) of the regulations requires certified installers and inspectors to report to the Department a release of a regulated substance or confirmed or suspected contamination of soil, surface or groundwater from regulated substances observed while performing services as a certified installer or inspector.

This form may be used to comply with Subsection 245.132(a)(4). The Department expects submission of the form within 48 hours of observing suspected or confirmed contamination. Where there is a reportable release, the form may be submitted jointly by the owner, operator, certified installer and certified inspector. In this instance, the form must be received by the appropriate regional office within 15 days of the notice required by Subsection 245.305(a).

**CERTIFIED INSTALLERS AND INSPECTORS (I/I)**

**PLEASE COMPLETE SECTIONS I, II, IIIA, IIIC, VI, VII and VIII.**

## **INSTRUCTIONS**

- I. **FACILITY INFORMATION** - Record the name, I.D. number and physical location (not P.O. Box) of the facility at which a reportable release has been confirmed or at which suspected or confirmed contamination has been observed. Include the name and phone number of a person to contact at the facility.
- II. **OWNER INFORMATION** - Record the name, business address and phone number of the owner of the facility identified in Section I.
- III. **REGULATED SUBSTANCE INFORMATION** - Indicate to the best of your knowledge: A) the type of product or products involved; B) the quantity of product or products released; and C) whether the contamination is suspected or confirmed.
- IV. **REPORTABLE RELEASE INFORMATION** - Record the date of confirmation of the reportable release, e.g., "08/21/93"; the date and regional office notified; and the date the local municipality (provide name of municipality) was sent a copy of this form. Indicate to the best of your knowledge the extent of contamination resulting from the release of the regulated substance.
- V. **INTERIM REMEDIAL ACTIONS** - Indicate the interim remedial actions planned, initiated or completed.
- VI. **SUSPECTED/CONFIRMED CONTAMINATION INFORMATION** - Record the date of observation of the suspected or confirmed contamination, e.g., "01/01/94". Indicate to the best of your knowledge the indications of a suspected release or extent of confirmed contamination resulting from the release of the regulated substance.
- VII. **ADDITIONAL INFORMATION** - Provide any additional, relevant, available information concerning the reportable release or suspected or confirmed contamination. Include in this section a brief description of the activity that was being conducted when the reportable release was confirmed by the owner or operator or when the suspected/confirmed contamination was observed by the certified installer or inspector, e.g., during a(n) installation, repair or upgrade, removal from service or routine inspection.
- VIII. **CERTIFICATION** - Please print your name, and provide your signature and date of signature. If a certified installer/inspector, provide certification number and company certification number.

**PLEASE SEND COMPLETED ORIGINAL FORM TO:**

PA Department of Environmental Resources  
Environmental Cleanup Program  
Storage Tank Section

(and the appropriate address below, depending on where the FACILITY is located)

<p><b>Southeast Region</b> One Park, Suite 6010 5 North Lane Shohocken, PA 19428 X: 610-832-6259/6250</p> <p><b>Counties</b> Delaware, Chester, Montgomery, Philadelphia</p>	<p><b>Northeast Region</b> Cross Valley Centre 667 North River Street Plains, PA 18705 FAX: 717-826-5448</p> <p><b>Counties</b> Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, Wyoming</p>	<p><b>Southcentral Region</b> One Ararat Boulevard Harrisburg, PA 17110 FAX: 717-540-7492</p> <p><b>Counties</b> Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, York</p>	<p><b>Northcentral Region</b> 200 Pine Street Williamsport, PA 17701 FAX: 717-327-3565</p> <p><b>Counties</b> Bradford, Cameron, Centre, Clinton, Clearfield, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, Union</p>	<p><b>Southwest Region</b> 400 Waterfront Drive Pittsburgh, PA 15222 FAX: 412-442-4194</p> <p><b>Counties</b> Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, Westmoreland</p>	<p><b>Northwest Region</b> 1012 Water Street Meadville, PA 16335 FAX: 814-332-6831</p> <p><b>Counties</b> Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, Warren</p>
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## **I. FACILITY INFORMATION (Both O/O and I/I)**

Facility Name Chemical Leaman Tank Lines 4-806637 Facility I.D. Number 4-806637  
 Street Address (P.O. Box not acceptable) Route 248  
 City Nazareth State PA Zip Code 18064  
 County Northampton Municipality Nazareth  
 Contact Person Ed Kinsley Phone Number (610) 759-3407

## **II. OWNER INFORMATION (Both O/O and I/I)**

Owner Name Chemical Leaman Tank Lines, Inc.  
 Address 102 Pickering Way  
 City Exton State PA Zip Code 19341-0200  
 Phone Number (610) 363-4284



I-PM-WQ0032 2/94

## VII. ADDITIONAL INFORMATION (Both O/O and I/I)

Include a brief description of the activity that was being conducted when the reportable release was confirmed by the owner or operator or when the suspected/confirmed contamination was observed by the certified installer or inspector, e.g., during a(n) installation, repair or upgrade, removal from service or routine inspection.

Reportable releases confirmed during removal of UST Nos. 001 - 006.

## VIII. CERTIFICATION (Both O/O and I/I)

DONALD H. EMING, VICE PRESIDENT FOR ENVIRONMENTAL  
(Print Name) AGENT FOR THE

hereby certify, under penalty of law as provided in 18 Pa. C.S.A. 4904 (relating to unsworn falsification to authorities) that I am the owner or operator of the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

Donald H. Eming  
Signature of Owner or Operator

9-29-95  
Date

John P. Reiner  
(Print Name)

hereby certify, under penalty of law as provided in 18 Pa. C.S.A.

4904 (relating to unsworn falsification to authorities) that I am the certified installer who performed tank handling activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

John P. Reiner, Jr.  
Signature of Certified Installer

10-1-95  
Date

4622  
Installer Certification Number

1112  
Company Certification Number

(Print Name)

hereby certify, under penalty of law as provided in 18 Pa. C.S.A.

4904 (relating to unsworn falsification to authorities) that I am the certified inspector who performed inspection activities at the above referenced storage tank facility and that the information provided by me in this notification is true, accurate and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Certified Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Inspector Certification Number

\_\_\_\_\_  
Company Certification Number

APPENDIX B (Page 3 of 3)

APPENDIX D

Manifest for Disposal



State of New Jersey  
Department of Environmental Protection and Energy  
Hazardous Waste Regulation Program  
Manifest Section  
CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No.		2. Page 1 of 1		Information in the shaded area is not required by Federal law	
3. Generator's Name and Mailing Address ABC Tank Company, Inc. 1029 North Delsea Drive Clayton, NJ 08312		4. Generator's Phone (609) 881-6586		5. Transporter 1 Company Name ABC Tank Company, Inc.		6. US EPA ID Number NJ00091615131411711141515		A. State Manifest Document Number <b>NJA 2011455</b>	
7. Transporter 2 Company Name ABC Tank Company, Inc.		8. US EPA ID Number NJ00091615131411711141515		9. Designated Facility Name and Site Address ABC Recycling, Inc. PO Box 275 Cenco Blvd. Clayton, NJ 08312		10. US EPA ID Number NJ0009161111313115110		B. State Generator's ID (Gen. Site Address) See Attached List	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) a. X Combustible Liquid, N.O.S. (Fuel oil) NA1993, PGIII (X7 60)		12. Containers No. Type		13. Total Quantity 1450		14. Unit Wt/Vol G		15. Waste No. X 7 2 2	
b.									
c.									
d.									
16. Additional Descriptions for Materials Listed Above Waste Petroleum Oil ESTO 602		17. Identification/Classification 502/T04		18. Handling Codes for Wastes Listed Above 502/T04		19. Special Handling Instructions and Additional Information Lab Code P093 24 Hour Emergency Response # (609) 881-6586 ERG-1 27		20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name ABC Tank Company, Inc.		Signature [Signature]		Month Day Year 12/1/93			
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name [Name]		Signature [Signature]		Month Day Year 12/1/93			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name James R. Castellani Jr		Signature [Signature]		Month Day Year 12/1/93			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name [Name]		Signature [Signature]		Month Day Year 12/1/93			

APPENDIX E

Tank Official Weighmasters Certificate

CHEMICAL LEHMAN OFFICIAL  
Seller's Name WEIGHMASTER'S CERTIFICATE  
90 Ron Voorheis  
Address E. SCHNEIDER & SONS, INC.  
NAZARETH PA  
City, Town or Borough P.O. BOX 908  
ALLENTOWN, PA 18105-0908  
435-1367

No 112617 P  
10:46AM 9-26-95

Date 11:11AM 9-26-95

Driver X In Out  
Unprep P's-Tmk  
Commodity  
35460 1b  
Gross 1bs  
Tare 28780 1b  
Net 6680 1bs

• PLEASE READ CAREFULLY •

Notwithstanding any other warranty or limitation of warranty herein, Seller warrants that to the best of their knowledge, based upon reasonable inquiry, the metal scrap to be delivered under this contract of sale does not contain any "hazardous substances" as that term is defined in Sec. 101(14) of the Comprehensive Environmental Response, Compensation and Liability Act 42, U.S.C., Section 6901(14), except those "hazardous substances" which are integral constituents of the metallic fractions of the scrap metal. Seller will indemnify and hold E. Schneider & Sons, Inc. et al harmless from any and all claims, demands and liabilities, including reasonable attorney's fees resulting in whole or part from a breach on the foregoing warrant.

"I, the undersigned, do hereby represent to E. Schneider & Sons, Inc. that I or the person or firm for whom I am acting is the owner of these materials and has the right to sell and deliver them, and that no other person or firm has any interest in said materials or claim to the proceeds of sale."

Notwithstanding any other warranty or limitation of warranty herein, Seller/Hauler warrants that to the best of their knowledge, based upon reasonable inquiry, automobiles and refrigeration units and other scrap material to be delivered under this contract of sale does not contain any refrigerant fluids ("Chlorofluorocarbons" CFCs and/or "Hydrochlorocarbons" HCFCs) as that term is defined in Sections 608 (b) (1) and 608 (c) of the Clean Air Act amendments. Seller/Hauler will indemnify and hold E. Schneider & Sons, Inc. et al harmless from any and all claims, demands and liabilities, including reasonable attorney's fees resulting in whole or part from a breach on the foregoing warrant.

E. Schneider & Sons, Inc. will not be held responsible for damage or liability to customer vehicles which may occur during loading and unloading.

Ron Voorheis  
SIGNATURE

DATE

JS

Weighmaster's Signature

Seal Number

Humes  
Vehicle License No. Trailer License No. Delivered by

\$ 225 1/2 cent  
Price  
LESS SERVICE CHARGE  
8 150.30  
Total  
8 100.00  
8 50.30

Chemical Lehman

Seller's Name

To Ron Voorheis

Address

City, Town or Borough

OFFICIAL  
WEIGHMASTER'S CERTIFICATE

E. SCHNEIDER &amp; SONS, INC.

P.O. BOX 908

ALLENTOWN, PA 18105-0908

435-3527

No 112631 P

2:29PM 9-26-95

Date 2:45PM 9-26-95

Driver In Out

Unprep P+S Tank  
Commodity

Gross 38740 lb

Tare 28880 lb

Net 9860 lbs

## \* PLEASE READ CAREFULLY \*

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E. Schneider & Sons, Inc. will not be held responsible for damage or liability to customer vehicles which may occur during loading and unloading.

Ron Voorheis

SIGNATURE

DATE

Weighmaster's Signature

10987  
Seal Number

Vehicle License No. Trailer License No. Delivered by

# 225

Price

LESS

Service Charge

# 221.85

Total

\$

100.00

# 121.85



OFFICIAL

No 112622 P

## WEIGHMASTER'S CERTIFICATE

Seller's Name

Ronn Dorchels

Address

NAZARETH PA

City, Town or Borough

E. SCHNEIDER &amp; SONS, INC.

P.O. BOX 008

ALLENTOWN, PA 18105-0908

435-3524

12:41PM 9-26-95

Date 12:57PM 9-26-95

Driver X In Out

UNPREP P45-TRN

Commodity

Gross 38680 lb

Tare 28900 lb

Net 9780 lbs

## \* PLEASE READ CAREFULLY \*

Notwithstanding any other warranty or limitation of warranty herein, Seller warrants that to the best of their knowledge, based upon reasonable inquiry, the metal scrap to be delivered under this contract of sale does not contain any "hazardous substance" as that term is defined in Sec. 101(14) of the Comprehensive Environmental Response, Compensation and Liability Act 42, U.S.C., Section 6901(14), except those "hazardous substances" which are integral constituents of the metallic fraction of the scrap metal. Seller will indemnify and hold E. Schneider & Sons, Inc. et al harmless from any and all claims, demands and liabilities, including reasonable attorney's fees resulting in whole or part from a breach on the foregoing warrant.

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E. Schneider & Sons, Inc. will not be held responsible for damage or liability to customer vehicles which may occur during loading and unloading.

SIGNATURE

DATE

Weighmaster's Signature

Seal Number

Vehicle License No.

Trailer License No.

Delivered by

\$2.25

Price

\$220.05

Total

LESS Service Charge \$100.00

\$120.05

# REGISTRATION OF STORAGE TANKS

In accordance with Sections 303 and 503 of the Storage Tank and Spill Prevention Act, owners of regulated storage tanks are required to register their tanks with the Department and pay the required fees.  
\*\*\* PLEASE READ ALL INSTRUCTIONS THOROUGHLY BEFORE COMPLETING THE FORM.

STORAGE TANKS  
FACILITY:

## I. PURPOSE OF SUBMITTAL (Please Check Those That Apply)

### INITIAL REGISTRATION

- ☐ Initial Registration  
☐ Registration for Removal of Unregistered Tank(s)  
☐ Registration for Un-Registered Tank(s) Closed in Place

### AMENDED REGISTRATION

- ☐ Change in Previous Info  
☐ Adding Tank(s)  
☐ Temporarily Not Using Tank(s)  
☒ Removed / Closed Tanks  
☐ Relocated Tank(s) (Same Owner-Different Facility)

### CHANGE OF OWNERSHIP

- ☐ Sold / Purchased  
☐ All Tanks Will Remain at Same Facility  
☐ Some Tanks Will Remain at Same Facility  
☐ Some Tanks Relocated to Another Regulated Facility  
☐ Some Tanks Relocated to a New Facility and the Tanks are to Be Registered

NOV - 1 1995

COUNTY:  
FILE CODE:

STATE USE ONLY  
DO NOT WRITE IN THIS SPACE

## II. OWNER / BUSINESS INFORMATION (Please Type or Print Legibly)

### A. DER CLIENT ID NO. (STATE USE ONLY)

Federal Tax ID No.,  
EIN (or SS) No. 2 3 2 0 2 1 8 0 8

Owner Name Chemical Leaman Tank Lines, Inc.  
Address 102 Pickering Way

City Exton State PA Zip 19341-0200

County Chester Municipality Uwchlan Twp.  
Phone No. (610) 363 4284

### Type of Owner/Business (Check Only One)

- ☐ Vol. Fire Co./EMS Org. ☒ Corporate  
☐ Federal Government ☐ Private (Business)  
☐ State Government ☐ Private (Residential)  
☐ Local Government

### B. CHANGE OF OWNERSHIP

(Complete - Only if some or all tanks have been sold or purchased.)

Date of Sale/Purchase

Sold To

(New Owner Name)

(New Address)

Purchased From

(Old Owner Name)

(Old Address)

(Old Facility ID No.)

(Old Tank No.(s))

## III. FACILITY INFORMATION (Please Type or Print Legibly)

### A. DER FACILITY ID NO. 48-06637

Facility Name Chemical Leaman Tank Lines, Inc.

Location (PO Box NOT acceptable) (RR Box IS acceptable)  
Route 248

City Nazareth State PA Zip 18064

County Northampton Municipality Nazareth

Phone No. (610) 759 3407

### Type of Facility (Check Only One)

- ☐ 00 Unknown ☐ 10 Federal, Military  
☐ 01 Gas Station ☐ 11 Commercial  
☐ 02 Petroleum Distr ☐ 12 Industrial  
☐ 03 Air Taxi ☐ 13 Residential  
☐ 04 Aircraft Owner ☐ 14 Contractor  
☐ 05 Auto Dealership ☒ 15 Trucking/Transport  
☐ 06 Railroad ☐ 16 Utilities  
☐ 07 Local Govt ☐ 17 Farm  
☐ 08 State Govt ☐ 99 Other SPECIFY  
☐ 09 Federal, Non-Military

### B. CONTACT (Optional)

(Complete - Only if mail is to be sent to someone other than the owner or if mail is to be sent to a specific person or department within a company.)

☐ Send all mail to Facility address noted to the left.

☒ Send all mail to Contact address noted below:

Name Donald K. Emig, Ph.D., P.E.

Title Vice President & Chief Engineer

Mailing Address 102 Pickering Way

City Exton State PA Zip 19341

Phone No. (610) 363 4284

Facility ID No. 4806637 Facility Name Chemical Leaman Tank Lines, Inc.

# DESCRIPTION OF STORAGE TANKS (Please type or print legibly each regulated storage tank at this facility under your ownership.)

**ABOVEGROUND TANKS** List ALL tanks. If amending information, mark the Amended Tank(s) with an asterisk (\*) to the left of the tank number.

Tank Number	STATUS	Install Date (Mo-Day-Yr)	Remove Date (Mo-Day-Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name and CAS No. (If Hazardous Substance)	Substance Name (If Other or Mixture)	Tank Exempt	
								✓ If Yes	Ref. Code
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									

STATUS Codes: C - Currently in Use; T - Temporarily Out of Use; R - Removed or Closed in Place

**UNDERGROUND TANKS** List ALL tanks. If amending information, mark the Amended Tank(s) with an asterisk (\*) to the left of the tank number.

Tank Number	STATUS	Install Date (Mo-Day-Yr)	Remove Date (Mo-Day-Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name and CAS No. (If Hazardous Substance)	Substance Name (If Other or Mixture)	Tank Exempt	
								✓ If Yes	Ref. Code
01	R	1960	9/19/95	4,000	B				
02	R	1960	9/19/95	4,000	B				
03	R	1960	9/19/95	4,000	B				
04	R	1963	9/19/95	550	G				
05	R	1973	9/20/95	1,000	G				
06	R	1960	9/19/95	6,000	E			X	
07	R	1973	9/19/95	6,000	E			X	

STATUS Codes: C - Currently in Use; T - Temporarily Out of Use; R - Removed or Closed in Place

## V. CERTIFICATION (Read and Sign after completing all appropriate sections.)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. This registration is conditioned upon compliance with provisions of the Storage Tank and Spill Prevention Act, with any regulations and orders issued pursuant to this Act, and with the requirements for obtaining a permit required under this Act.

I am advised that signature by an individual on this document indicates that he/she owns the subject storage tank and, in effect, represents to the Department that the individual owns the storage tank and is aware of those responsibilities and potential liabilities as an "owner" arising under the Storage Tank and Spill Prevention Act and its regulations. Please be further advised that registration is made subject to the penalties of 18 P.A.C.S. Section 4904 relating to unsworn falsification to authorities.

Name and Official Title of Owner  
Donald K. Emig, Ph.D., P.E.

Signature

Date Signed

10-30-95

Authorized representative

Detach and return this page to the Division of Storage Tanks

STORAGE TANK DATA SYSTEM  
FACILITY SCREEN

WQST001B  
PAGE 1

FACILITY ID# 48-06637 OWNER ID# 2339

FACILITY NAME CHEM LEAMAN TANK LINES INC

SITE RT 248 EASTON RD

ADDRESS 102 PICKERING WAY

CITY NAZARETH

STATE PA ZIP CODE 18064

PHONE (215)363-4235-

COUNTY 48 NORTHAMPTON

MUNIC

LONGITUDE

LATITUDE

FACILITY TYPE 00 UNKNOWN

SIGNATURE DATE

NUMBER OF ABOVEGROUND TANKS 0

NUMBER OF UNDERGROUND TANKS 7

TOTAL NUMBER OF TANKS 7

er Facility Identification Number.  
it: \*1

<Replace>

01-1995

BUREAU OF WATER QUALITY  
TANK LIST

PAGE 1

CILITY ID# 48-06637  
ILITY NAME CHEM LEAMAN TANK LINES INC

K#	SEQ#	STATUS	CAPACITY REG DATE	INST DATE EXPR DATE	SUBSTANCE STORED LAST BILLING YEAR
06	001	C	4,000 03-28-1995	01-01-1960 04-04-1996	DIESEL INVOICED THRU 1996
07	002	C	4,000 03-28-1995	01-01-1960 04-04-1996	DIESEL INVOICED THRU 1996
08	003	C	4,000 03-28-1995	01-01-1960 04-04-1996	DIESEL INVOICED THRU 1996
09	004	E	550 03-28-1995	01-01-1963 04-04-1996	USED MOTOR OIL INVOICED THRU 1996
10	005	E	550 03-28-1995	01-01-1973 04-04-1996	USED MOTOR OIL INVOICED THRU 1996
11	006	C	6,000 03-28-1995	01-01-1960 04-04-1996	HEATING OIL INVOICED THRU 1996
12	007	C	6,000 03-28-1995	01-01-1973 04-04-1996	HEATING OIL INVOICED THRU 1996

K-5-u-5  
R-2- exempt (H.O.)

E NUMBER 00003156 TYPE LUST/CLOSURE FACILITY ID 4806637  
E CHEMICAL LEAMAN-NAZA SSR DATA ENTRY FORM Yes  
LET 102 PICKERING WAY CITY NAZARETH ZIP 18064

NTY NORTHAMPTON MUNI NAZARETH <sup>Lower</sup> ~~BORO~~ <sup>Top</sup>  
EST1 SUPEY INVEST2 RYAN PRIORITY 7 ACTIVE ACTIVE  
INITIATED  
LEGAL STATUS COMNO 10/4/95  
CLOSED

E1	8/22/95	ACT	REC'D 30-DAY NOT/1-4	DATE9	ACT
E2	9/19/95	ACT	REC'D NOTIF OF CONT	DATE10	ACT
E3	11/01/95	ACT	REC'D CLOS RPT/1-5 &	DATE11	ACT
E4		ACT	2 UNREGUL'D HO TNKS	DATE12	ACT
E5	12/06/95	ACT	ASSIGNED TO E SUPEY	DATE13	ACT
E6		ACT		DATE14	ACT
E7		ACT		DATE15	ACT
E8		ACT		DATE16	ACT